



Fee Purpose only

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of

Chovan

Group Art Unit: **2877**

Serial No. **10/632,307**

Atty. Dkt: **LMC-53**

Filing Date: **08/01/2003**

Examiner: **Connolly, Patrick J.**

For: **SENSOR FOR OPTICALLY SENSING AIRBORNE ACOUSTIC WAVES**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE

Dear Sir:

Response to the Office Action mailed June 14, 2004 in the above-identified patent application was due September 14, 2004, without extension. A petition for a three month extension of time to respond, through and including December 14, 2004, has been filed herewith. Accordingly, the present response is deemed to be timely filed. Should there be any fees due and owing with respect to this amendment and response, the Office is authorized to charge such fees to deposit account no. 50-3208. Please enter the following amendments and remarks.

Amendments to the Claims are reflected in the listing of Claims that begins on page 2 of this paper.

Applicant's Remarks begin on Page 6 of this paper.

12/20/2004 HAL111 00000042 10632307

01 FC:1201

200.00 OP

01/18/2005 VBR0002 00000003 10632307

02 FC:1201 200.00

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

106323.07

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	3	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	3 minus 20 = *	
INDEPENDENT CLAIMS	2 minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 17 Minus	20	=
Independent	* 5 Minus	3	2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* Minus	**	=
Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* Minus	**	=
Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	375.00
X\$9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	750.00
X\$18=	
X84=	
+280=	
TOTAL	

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	400.00
+280=	
TOTAL ADDIT. FEE	400.00

RATE	ADDITIONAL FEE
X\$9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

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